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The Mythological Role of the Hymen in Virginity Testing

Savannah Delgross '19



For an episode of her Netflix docuseries *Sex & Love Around the World*, journalist Christiane Amanpour traveled to Beirut, Lebanon to explore Arab culture in relation to female sexuality. In this episode, a gynecologist/sexologist in Beirut meets with a female patient who is about to marry her fiancé and not only fears losing her virginity, but sex in general. She says she is so uncomfortable whenever sex scenes appear on television that she must leave the room, and she has cancelled two other marriage engagements out of fear of sex, which for her, also comes with the fear of losing her hymen. The doctor tells Amanpour that her patient's fear of sex comes from growing up in a religious culture that fetishizes the hymen. "It's not easy letting go of something you've been instructed to protect your whole life," she says ("Beirut"). Clearly, the religious and cultural obsession of the hymen informs this woman's sense of self and limits her sexuality.

As the hymen is believed to be integral to diagnosing virginity, the cultural understanding around it contributes to determining a woman's social status. Virginity tests that involve an examination of the hymen to diagnose a woman's virginity rely on the notion that the appearance of a hymen can provide evidence of whether a woman is a virgin or not. However, given the lack of forensic evidence that the existence or appearance of the

hymen can indicate one's sexual experiences, virginity testing exists on the basis of belief rather than facts. Therefore, it is unethical for virginity tests, which are entrenched in religious values and cultural ideology rather than standards of evidence, to be performed as a medical practice. When a woman has an upbringing in a society that values virginity tests, recognizing the practice as a negative obligation to the woman's relational autonomy is of importance to denying the testing altogether. This is to say that the woman could be "in danger of oppressive socialization and oppressive social relationships that impair their autonomy by conditions that unduly form their desires, beliefs, emotions, and attitudes and improperly thwart the development of the capacities and competencies essential for autonomy" (Beachamp and Childress 106). A woman's autonomy should not be subjected to the harmful patriarchal constraints that socialize her oppression.

Although values of the hymen vary across cultures and eras, it is evident that the hymen plays a strong, symbolic role rather than a factual one. It is commonly believed that the hymen is a membrane that covers the opening of the vagina (Christianson and Eriksson 108). The existence of a membrane founds many cultural understandings of the hymen, as it is often believed that a hymen breaks or tears upon virginity loss. Although a societal understanding of the covering membrane still persists today, its existence has been debunked in the medical field. Early physicians, like Soranus of Ephesus of 2nd century CE, did not find evidence that every woman has a thin membrane that grows across the vagina (15). Yet, recently, in 2013, researchers Monica Christianson and Carola Eriksson found that people believe a membrane is the norm, as 66% of international midwives believed girls are born with a covering membrane that breaks during

vaginal intercourse (Christianson and Eriksson 108). A 2011 study found that 1 in 1000 to 1 in 10,000 girls are born with a covering membrane, known as a “hymen imperforate” (Christianson and Eriksson 108).

Universalizing this conception – that the hymen is a covering membrane – dismisses the fact that physical variants among female bodies exist, allowing sociocultural politics to determine and popularize a mythologized definition of vaginal anatomy. In parts of the world where chastity ideals remain strong, Christianson and Erikson conclude that, “the myths about a ‘tiny membrane’ create traditional social constructions for women as good wives and good mothers” and such myths only serve to control women’s sexuality (Christianson and Eriksson 108).

Loaded with patriarchal values, the hymen signifies much more than the mere existence of a membrane. In Lebanon (and many parts of the world), women are expected to have an intact hymen until their wedding night, also known as “the night of penetration” (“laylit al dukhla”) in Arab culture (El Kak, El Salibi, Yasmine, and Ghandour 155). The intact hymen represents a woman’s purity and chastity, which upholds her family honor and enhances her marriageability (El Kak et al 155). In Lebanon, the strong cultural ideals revolving around the hymen controls women’s bodily autonomy (El Kak et al 155).

Consequently, women, like the female patient from Lebanon in *Sex & Love Around the World*, grow a desire to protect their hymen, which, for them, also means protecting their virginity. A study conducted in Lebanon in 2012 titled “Hymen protection and the sexual practices, perceptions, and attitudes of female university students from Lebanon,” looks at the ways women participate in sexual acts while protecting their hymen. Researchers found that 39.3% of women reported participating in anal/oral sex to protect

their hymen (El Kak et al 155). The sociocultural values placed on the hymen, meant to restrict women's sexuality, coerces women to find a new means of submitting to the male pressures of heterosexual sex while keeping their hymen intact. For some women, engaging in oral or anal sex might violate religious prohibitions around sexuality, yet women find it more important to not engage in vaginal sex in order to protect their hymen. As the female patient makes clear, the hymen is so highly fetishized in her culture that it is understood more like a protected ideal rather than a part of her body.

While the term 'intact hymen' often signals virginity, what qualifies as a sign of virginity is disputed across various cultures. For example, the Spanish Roma people called Gitanos believe there is a grape, an uva, that contains yellowish liquid, called the honra (Blank 75). However, a description of this grape is not mentioned in any Western book of anatomy, nor do gynecologists identify the grape (Blank 75). The Gitanos believe the liquid can only be spilled once, when a woman loses her virginity on her wedding night and is worthy of celebration. This differs from the popular signs of virginity in Western culture – intact hymen and bleeding. Thus, there is no standard, objective evidence for signs of virginity that cuts across culture and time. The signs of virginity, including the hymen, are easily mythologized – they're ideals clinging to cultural values respective to a certain place and time.

Some virginity tests function on the basis that a hymen's physical existence, form, or appearance can indicate vaginal penetration. In a study that analyzed medical findings which support or refute allegations of sexual penetration, researchers Felicity Goodyear-Smith and Tannis Laidlaw conclude in their article, "What is an

‘Intact’ Hymen? A Critique of the Literature,” that, due to the natural variability in the size, shape, and appearance of hymens, “it is impossible to establish whether or not a hymen is ‘intact’ with respect to past sexual intercourse” (299). They also took into account that the hymen can be disrupted from non-sexual causes, such as tampon use, sporting activities, or undergoing a pelvic examination (Goodyear-Smith and Laidlaw 295-297). In societies where the hymen upholds virginity ideals, virginity tests that involve the examination of the hymen suggest that an ideal hymen – one intact, undisrupted, and unchangeable – must exist. This seems a mere fetishizing of the hymen that does not acknowledge the fact that hymens vary heavily in appearance. Without a standard for evidence, virginity should not be diagnosable through vaginal examination.

A hymen plays a mythological role in virginity tests as its ideals vary in accordance to culture and its anatomical existence cannot prove virginity – both of these notions eliminate its significance in diagnosing virginity on the basis of forensic evidence. The hymen’s real significance, rather, relies on social norms and traditions. In Lebanon, many women resort to hymenoplasty – the surgical repair of the hymen to appear intact – in order to restore their marriageability according to Lebanese social norms and traditions (Hajali 28). The intact hymen is a marriage prerequisite among Lebanese men. The implied goal of hymenoplasty is to return the hymen to a natural standard, yet that standard is not definitively established. V. Raveenthiran notes that “the appearance of a hymen is variously described as cribriform, eccentric septate, annular, crescentic, denticulate, infundibuliform, subseptus, microperforated, vertical and sculptatus” and to which of these “normal variations” the plastic surgeon is trying to emulate during surgery is not made clear (V. Raveenthiran

224-225). This is to say that hymenoplasty is an intense practice of reinforcing the patriarchal values behind the hymen, further perpetuating the myth of an intact hymen proving chastity, to control women's bodies and sexuality.

It is unethical to conduct virginity tests because it asks practitioners to look for socially-constructed, virginal ideals in bodies. Other than an intact hymen, virginity tests can observe other "signs" of virginity believed to be found by examining the body. However, all virginity tests look for signs of virginity, not virginity itself (Blank 77). Some virginity tests look at the size of breasts, throat size, or urination patterns that are established by culturally-specific gender norms in societies. A practice based on socially-constructed signs of evidence, such as the intact hymen, should not be part of the medical field, as such myths could easily be mistaken as medical knowledge. One could argue that virginity tests are ethical because of ethical relativism, "the view that moral standards are not objective but are relative to what individuals or cultures believe" (Vaughn 13). However, when forensic science can debunk the notion that hymens cannot indicate virginity, moral absolutism, "the belief that objective moral principles allow no exceptions or must be applied the same way in all cases and cultures" should override relativism (Vaughn 13). Trusting forensic evidence should be an objective, moral principle. Physicians should deny conducting virginity tests in support of the fact that virginity cannot be seen or measured, and let clients know it is not their place to conduct the test. This will be harder to do in societies where women's virginal status determines their social status, but in the medical sphere, a basis of forensic evidence should be at the root of all medical tests.

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